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U.S. Department of Commerce
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Application Number	10/018,987
Filing Date	May 1, 2002
First Named Inventor	Jarmo Luksua
Group Art Unit	2882
Examiner Name	Irakli Kiknadze
Attorney Docket Number	2542-00034

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of pages in this Submission 10+

ENCLOSURES (check all that apply)

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Peter T. Holsen (Reg. No. 54,180) ANDRUS, SCEALES, STARKE & SAWALL, LLP 100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202
Signature	<i>Peter T. Holsen</i>
Date	9/8/03

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PTO/SB/17 (8/96)		COMPLETE IF KNOWN		
FEE TRANSMITTAL		Application Number	10/018,987	
		Filing Date	May 1, 2002	
		First Named Inventor	Jarmo Luusua	
		Group Art Unit	2882	
		Examiner Name	Irakli Kiknadze	
Total Amount of Payment (\$)		290.00	Attorney Docket Number	2542-00034
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 01.2000 Account Deposit Name: ANDRUS, SCEALES, STARKE & SAWALL, LLP <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 <input type="checkbox"/> The Commissioner is hereby authorized to charge the issue fee and any additional fees required under 37 C.F.R. 1.18 to the above Deposit Account.. A duplicate copy hereof is enclosed.		Large Entity Small Entity Fee Fee Fee Fee Code (\$)		
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FEE CALCULATION (fees effective 10/01/96)				
1. FILING FEE				
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Code (\$)				
101 750 201 375 Utility filing fee				
106 330 206 165 Design filing fee				
107 520 207 260 Plant filing fee				
108 750 208 375 Reissue filing fee				
114 160 214 80 Provisional filing fee				
SUBTOTAL (1) (\$)				
2. CLAIMS				
Total claims 5 - 20 = X =				
Independent Claims 1 - 3 = X =				
Multiple Dependent Claims X =				
Large Entity Small Entity Fee Fee Fee Fee Fee Code (\$)				
103 18 203 9 Claims in excess of 20				
102 84 202 42 Independent claims in excess of 3				
104 280 204 140 Multiple dependent claim				
109 84 209 42 Reissue independent claims over original patent				
110 18 210 9 Reissue claims in excess of 20 and over original patent				
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Name (Print/Type) Peter T. Holsen		Registration No. 54,180		
Signature <i>Peter T. Holsen</i>		Telephone (414) 271-7590		
		Date 9/8/03		

Appln. No. 10/018,987

Extension dated September 8, 2003

Responsive to Office Action of June 4, 2003

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